

Practitioner's Docket No. 117163.00094

PATENT

Preliminary Classification:

Proposed Class:

Subclass:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of

Inventor(s): Dr. Gerald Czygan

For (title): STIMULATION DEVICE WITH STIMULATION OUTCOME MONITORING

1. Type of Application

This application is for an original (nonprovisional).

2. Papers Enclosed

- A. Required for filing date under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application

EXPRESS MAILING UNDER 37 C.F.R. § 1.10*

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14 Page(s) of Specification
 11 Page(s) of Claims
 4 Sheet(s) of Drawing(s)--Formal

B. Other Papers Enclosed

3 Page(s) of declaration and power of attorney
 1 Page(s) of abstract

3. Declaration or Oath

Enclosed, but not executed by the inventor.

4. Inventorship Statement

The inventorship for all the claims in this application is the same.

5. Language

English

6. Assignment

An assignment of the invention to Biotronik GmbH & Co. KG will follow.

7. Certified Copy

Certified copy of application:

<u>Country</u>	<u>Application Number</u>	<u>Filed</u>
Germany	102 50 996.4	10/30/2002

from which priority is claimed will follow.

8. Fee Calculation (37 C.F.R. § 1.16)

Regular Application

Regular Application									
CLAIMS AS FILED									
Basic Fee 37 C.F.R. § 1.16(a) \$770.00									
Number Filed			Number Extra			Rate			
Total									
Claims (37 C.F.R § 1.16(c))	64	—	20	=	44	x \$	18.00	= \$	792.00
Independent									
Claims (37 C.F.R § 1.16(b))	1	—	3	=	0	x \$	86.00	= \$	0.00

Multiple Dependent Claim(s),
if any (37 C.F.R § 1.16(d))

\$ 290.00

\$

0.00

Filing Fee Calculation

\$1,562.00

9. Fee Payment Being Made at This Time

Not Enclosed

No filing fee is to be paid at this time.

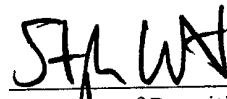
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Signature of Practitioner

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